PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

	Att rn y D ck t Number	ATM-273 Bohumil Lojek			
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor				
PATENT APPLICATION	COMPLETE IF KNOWN				
(37 CFR 1.63)	Application Number	/			
☑ Declaration ☐ Declaration	Filing Date				
Submitted OR Submitted after Initial	Group Art Unit				
with Initial Filing (surcharge Filing (37 CFR 1.16 (e)) required)	Examiner Name				

	or, I hereby declare that:						
wy residence, post office at	ddress, and citizenship are	as stated below next to my	name.				
names are listed below) of t	irst and sole inventor (if only the subject matter which is o OR DEVICE WITH A	claimed and for which a pat	tent is sought on				
the specification of which is attached hereto OR was filed on (MM/DD		e of the Invention)	4 States Annlica	tion Number or PCT International			
Application Number I hereby state that I have revamended by any amendmen I acknowledge the duty to dis	and waviewed and understand the ont specifically referred to about	as amended on (MM/DD/Y) contents of the above identione.	(YY) ified specification	(if applicable).			
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.							
		- before that of the applicati		only is claimed.			
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
Prior Foreign Application		Foreign Filing Date	Priority	Certified Copy Attached?			
Prior Foreign Application Number(s) Additional foreign application	Country ion numbers are listed on a	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
Prior Foreign Application Number(s)	Country ion numbers are listed on a number 35 U.S.C. 119(e) of any	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, VA 22313.

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION Iltility or Design Patent Application

	<u> </u>	NATIO		- Othic	<u> </u>		<u> Sigir</u>	rate	1116 /	<u> 121</u>	Jiicat		
United States United States information wh	of Americ or PCT In nich is ma	fit under 35 U.S. ca, listed below ternational applie terial to patental international filir	and, inso cation in bility as	ofar as the sub the manner pro defined in 37 C	ect matte vided by t FR 1.56 v	r of ea	ch of the	claims of th	is applic	ation is	s not disclos	sed	in the prior
U.S. Parent Application or PCT Parent Number				Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)						
	Number				**************************************		1		(ii appiic				
-		- 											
		PCT international ereby appoint the								_			
and Trademark	Office co	onnected therewi	th: 💢	Customer Num	ber		3897	ms applicati	on and to	► [Place C	usto	mer
				OR Registered pra-	ctitioner(s)	name/	registration	on number li	sted belo	" L	Number l		
	Nam	e		Regist Num				Nan	18				tration nber
Thomas	Schne	ck		24,518			Davi	d M. Sch	neck		43,094		
Mark Pro				31,788			Gina	McCarti	ηy		42		
Kwan Ch — Bradl		. Caba		52,714	0		Niss	a M. Stro	ttman	l	52,	25	7
Additional	registere	d practitioner(s)	named o	n supplemental	Registere	d Prac	titioner In	ormation sh	eet PTO	/SB/02	C attached h	nere	to.
Direct all con	respond	_		er Number Code Label	0038	97		OR	⋉ Co	orresp	ondence a	ddr	ess below
Name	Law	Offices of Schneck & Schneck							<u>-</u>				
Address	P.O	. Box 2-E											
Address													-
City	San	n Jose			S	State CA ZIP 951			09-0005				
Country	USA	1		Telephor	e 408	3/297	-9733		Fax	40	8/297-97	48	
believed to be punishable by	true; and fine or in	Il statements ma d further that the nprisonment, or t issued thereon.	ese state both, ur	ements were m	ade with t	the kno	owledae t	hat willful fa	lse state	ements	and the like	e so	made are
Name of S	ole or f	irst Invento	r:				A petition	n has been	filed fo	r this u	unsigned in	rve	ntor
Given Name (first and middle [if any])				Family Name or Surname									
	Bohu	Bohumil			Lojek								
Inventor's Signature											Date	4	9/27/0
Residence: (City	Colorado Springs State CO			Country U.S.A.			Citizensh	ip	U.S.A.			
Post Office A	ddress	4830 Langdale Way											
Post Office A	Address												
City	Colora	do Springs	State	СО	ZIP	80	0906	<u> </u>	Cou	ntry	U.S.A.		
∏Additional	invento	rs are being na	med o	n the sur	nlement	al Ado	litional Ir	ventor(s)	heet/e	PTO	SB/024 at	taci	ned beret